

Malnutrition: a neglected but leading cause of child deaths in Papua New Guinea

In resource-limited countries, childhood malnutrition is common and intertwined with poverty. Although substantial financial and political commitments have been made globally in an attempt to reduce childhood mortality, in the Pacific region, including Papua New Guinea, malnutrition remains a neglected but significant cause of childhood deaths.

The under-5 mortality in Papua New Guinea has been declining.¹ Significant funding support by the global community in recent years has enabled the revival of the malaria control programme in the Pacific region, resulting in a substantial decline in the incidence of malaria. Additionally, after the introduction of the pentavalent vaccine in 2007 and more recently the pneumococcal vaccine, the high burden of invasive *Haemophilus influenzae* type b and pneumococcal diseases, particularly presenting as pneumonia and acute bacterial meningitis, the two major causes of childhood death in Papua

New Guinea,^{2,3} is expected to decline provided vaccination coverage is sustained and improved. Despite these gains, however, malnutrition not driven by HIV is emerging as the most important cause of childhood mortality in Papua New Guinea.

Of 20 546 childhood hospital admissions throughout Papua New Guinea in 2012, 1660 children died and malnutrition directly caused or contributed to 36% of these deaths.⁵ Anecdotal data from the north coast of the country suggest that malnutrition is already the leading cause of childhood deaths. Of 3676 children aged 2 months or older admitted to Modilon hospital between 2009 and 2013, 314 (8.5%) died. Malnutrition directly caused or contributed to 45.5% of these deaths. Severe acute malnutrition was the primary diagnosis in 17% of deaths in 2009 (9/53), 15% in 2010 (6/39), 16% in 2011 (12/74), 12% in 2012 (10/80), and 23% in 2013 (16/68).

Despite the decline of malaria and the expected decline of vaccine-preventable bacterial infections, malnutrition, which has been neglected for many years, is emerging as the leading cause of childhood deaths in Papua New Guinea. Although

multifactorial, childhood malnutrition can be reduced if given a fair share of financial and political commitment, including basic strengthening of child health services, family planning services, and effective public health educational programmes.

We declare no competing interests.

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